# Western W Dental Enrollee Newsletter

# 2019 CDT Code Updates

The American Dental Association (ADA) has released the 2019 version of the Current Dental Terminology (CDT) Procedure Codes. Below is the list of new CDT Procedure Codes that will be included as covered benefits for all Western Dental Plans. Please note that the ADA deleted and replaced certain codes and those replacement codes now become the current Western Dental benefits.

STATUS	CODE	DESCRIPTION
DELETED	D1515	Space Maintainer - fixed - bilateral
REPLACMENT		Space maintainer - fixed - bilateral, maxillary Space maintainer - fixed - bilateral, mandibular
DELETED	D1525	Space Maintainer - removable - bilateral
REPLACMENT	D1526 D1527	Space maintainer – removable - bilateral, maxillary Space maintainer - removable - bilateral, mandibular
DELETED	D9940	Occlusal guard, by report
REPLACMENT		Occlusal guard - hard appliance, full arch Occlusal guard – soft appliance, full arch Occlusal guard - hard appliance, partial arch
NEW	D9990	Certified translation or sign-language services - per visit

## **Public Policy**

The Plan welcomes provider participation on its Public Policy Committee, which meets quarterly at the Plan's corporate office in Orange, California. In order to be considered for membership, please write or call the Plan's Provider Services department at 1-800-992-3366. Spring 2019

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## Dental Care For

### **Special Needs Members**

Special needs members need regular dental care. A healthy mouth helps a person eat well, and avoid pain and tooth loss. Brushing and flossing every day and seeing the dentist regularly can make a big difference in the quality of life for a special needs member, and regular visits to the dentist are important. A 'get acquainted' visit with no treatment provided might help. The member can meet the dental office staff, sit in the dental chair if he or she wishes, and receive instructions on how to brush and floss. This type of visit can go a long way toward making future dental appointments go easier

Parents and/or caretakers can also make dental appointments easier by being prepared. You may be asked to provide the special needs member's dental history and you should bring their complete medical history. This will assist the dentist in providing the best possible care

#### **Disclosure of Review Processes**

Upon request, WDS' Member Service Department will send you a copy of the guidelines and criteria that are used to determine if a service is covered or not when a dentist or WDS provider sends requests to WDS for benefits and/or claims for payment to an enrollee, a dentist or a member of the general public. You may ask for this information by writing to Western Dental Services, Inc., P.O. Box 14227, Orange, CA 92863, or by calling WDS Member Services at 1-800-992-3366.



### Language Assistance

#### Available

Many Western Dental enrollees speak a language other than English or may prefer to speak another language when discussing their dental health or dental plan benefit matters. Currently Western Dental offers free language assistance to our members. To arrange for this free service, you or your dentist may call the Member Services department directly at **1-800-992-3366** to arrange for an interpreter to join the call. Please allow some time for connection to this service.

Face-to-face interpreters in languages other than English (including Sign Language) may be available in some circumstances. Vital Documents such as plan brochures, provider directories, important forms and letters about Western Dental services, language rights and certain outreach materials are currently produced in Spanish. For more information about Language Assistance, contact **1-800-992-3366** 



# **Inquiries and Complaints**

- Enrollees (members) are encouraged to contact Western Dental at 1-800-992-3366 re-
- garding any concerns that they may have while obtaining services. Western Dental maintains
- a grievance process to address these concerns. Enrollee complaints or grievances can be
- made over the phone in person, at any Western Dental Provider
   Office, by obtaining a Western
- Dental Member Incident Form and submitting it to Western
- Dental, or by submitting the complaint using the Western Dental website at
- www.westerndental.com. Western Dental will send notification
- that the complaint has been received within five calendar days
   of receiving the complaint, and
- Western Dental will send a written response to the concerns
  within 30 days of receipt of the
- complaint.
- The California Department of Managed Health Care is respon-
- sible for regulating health care service plans. If you have a grievance against your Health
- Plan, you should first telephone your Health Plan at 1-800-992-
- 3366 and use your Health Plan's grievance process before contacting the Department. Uti-
- lizing this grievance procedure does not prohibit any potential
- legal rights or remedies that may be available to you. If you need help with a grievance in-

volving an emergency, a grievance that has not been satisfactorily resolved by your Health Plan, or a grievance that has remained unresolved for more than 30 days, you may call the Department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a Health Plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services. The Department also has a toll-free telephone numher

#### (1-888-HMO-2219)

and a TDD line

#### (1-877-688-9891)for

the hearing and speech impaired. The Department's Internet Web site at:

#### http:// www.hmohelp.ca.gov

has complaint forms, IMR application forms, and instructions online.

#### Who is Your Primary Care Provider?

Every Western Dental member is assigned to a primary care dental office (a "PCD"). The PCD will provide for the general dental needs of its assigned members. If you do not know who your PCD is, or if you would like to change your PCD, you can contact Western Dental to request a provider directory or specific information regarding your PCD or other PCDs in your area. The information that Western Dental can provide includes location and contact information for the PCD as well as the PCD's professional degree, board certifications, whether or not the PCD is accepting new patients at this time, and any recognized subspecialty qualifications a specialist may have.

To search our provider directory online, please go to <u>www.westerndentalbenefits.com</u>. Using this tool, you can find providers in your area, and then contact Member Services by telephone at **1-800-992-3366**, to complete the change.

For assistance please contact Western Dental by telephone at **1-800-992-3366**, by email at <u>MemberServ-ices@westerndental.com</u>, at our Western Dental website (www.westerndental.com) or by mail at Western Dental Benefits Division, 530 S. Main Street, Orange, CA 92868. We will be happy to help you select your PCD and begin your oral health care relationship.